

# Rethinking mental health: why policies must go beyond health care to take a public health approach

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Swiss Public Health Conference, 10 Sept 2025, Lugano

# Outline

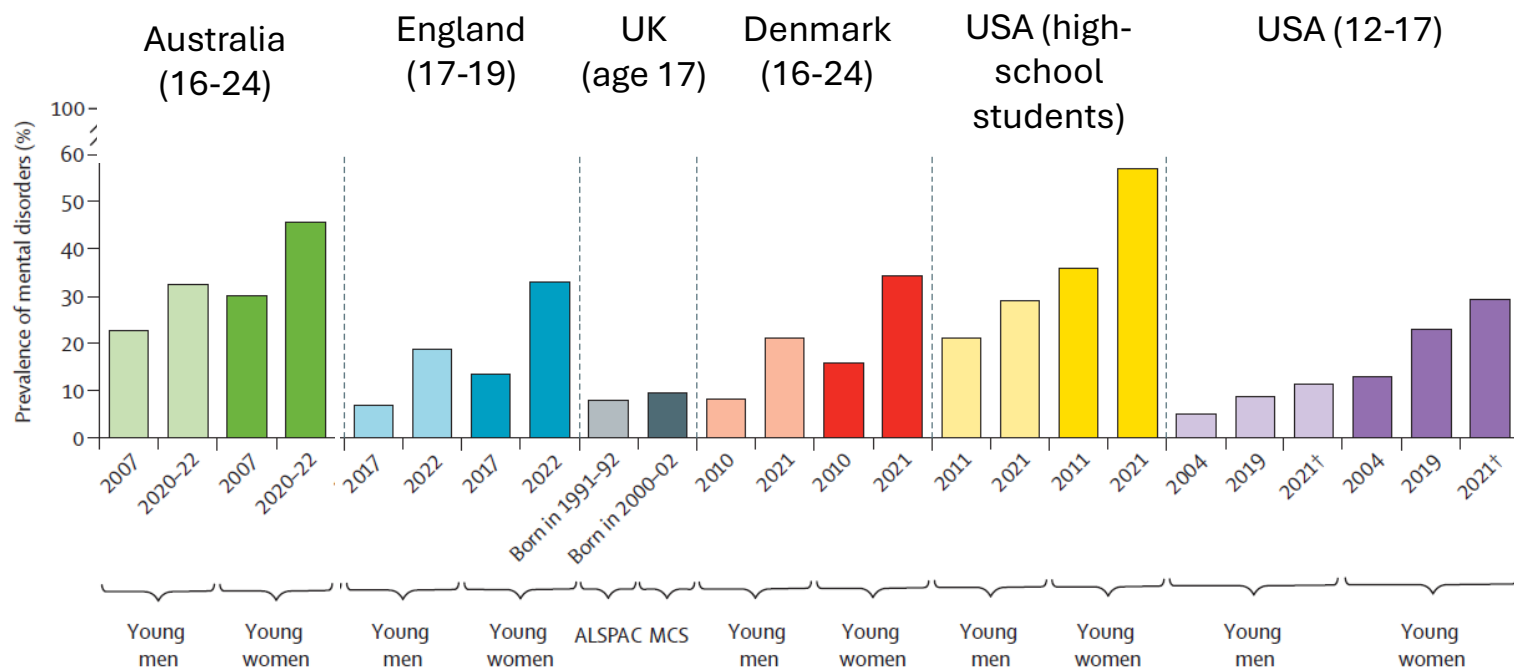
- 1. A public health approach to mental health – what it means and why it matters**
- 2. Public policies and mental health – four case studies**
- 3. Conclusion and implications**

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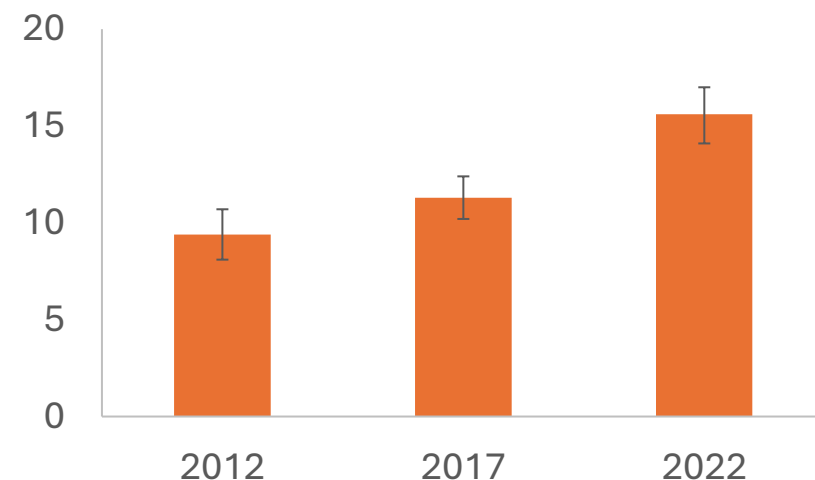
# A mental health crisis? Youth mental health trends by country and sex

## The *Lancet Psychiatry* Commission on youth mental health



Source: McGorry *et al*, *Lancet Psychiatry* 2024; 11: 731–74

## Moderate or severe depression symptoms, Switzerland, 15-34



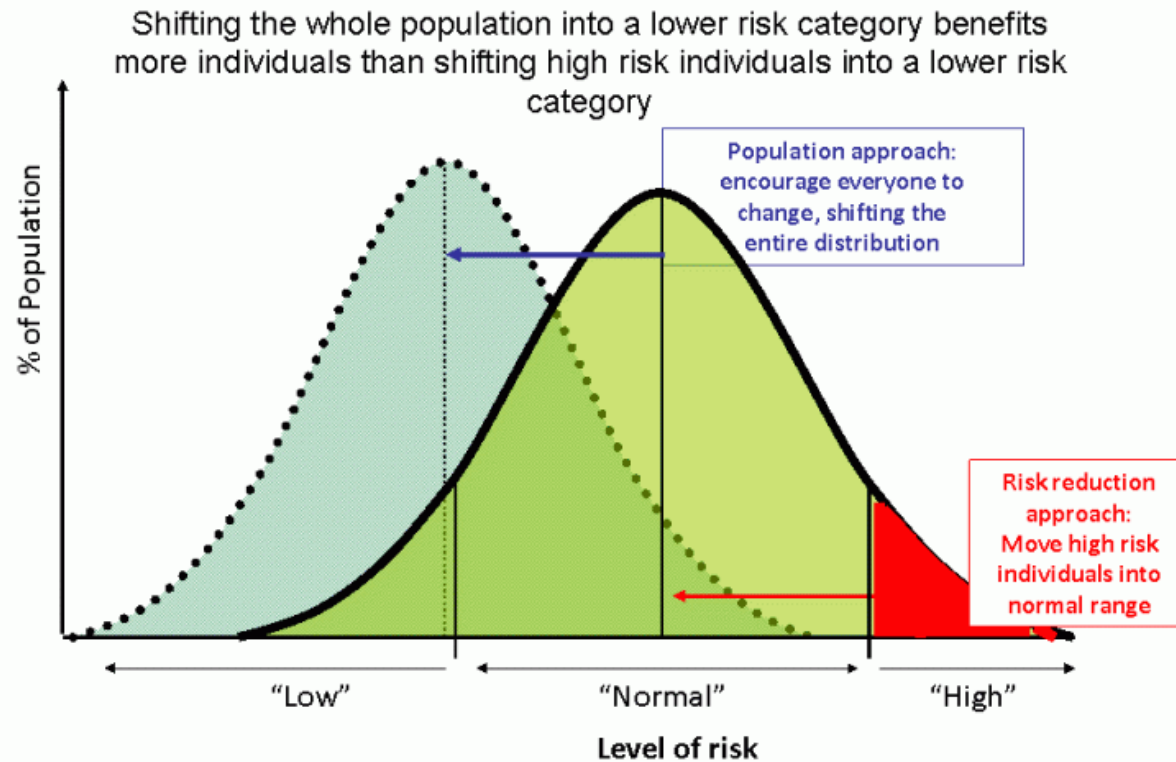
Source: OFS – Enquête suisse sur la santé (ESS), OBSAN

## How can a public health approach help us address mental health trends?

# A public health approach: Geoffrey Rose



## The Bell-Curve Shift in Populations

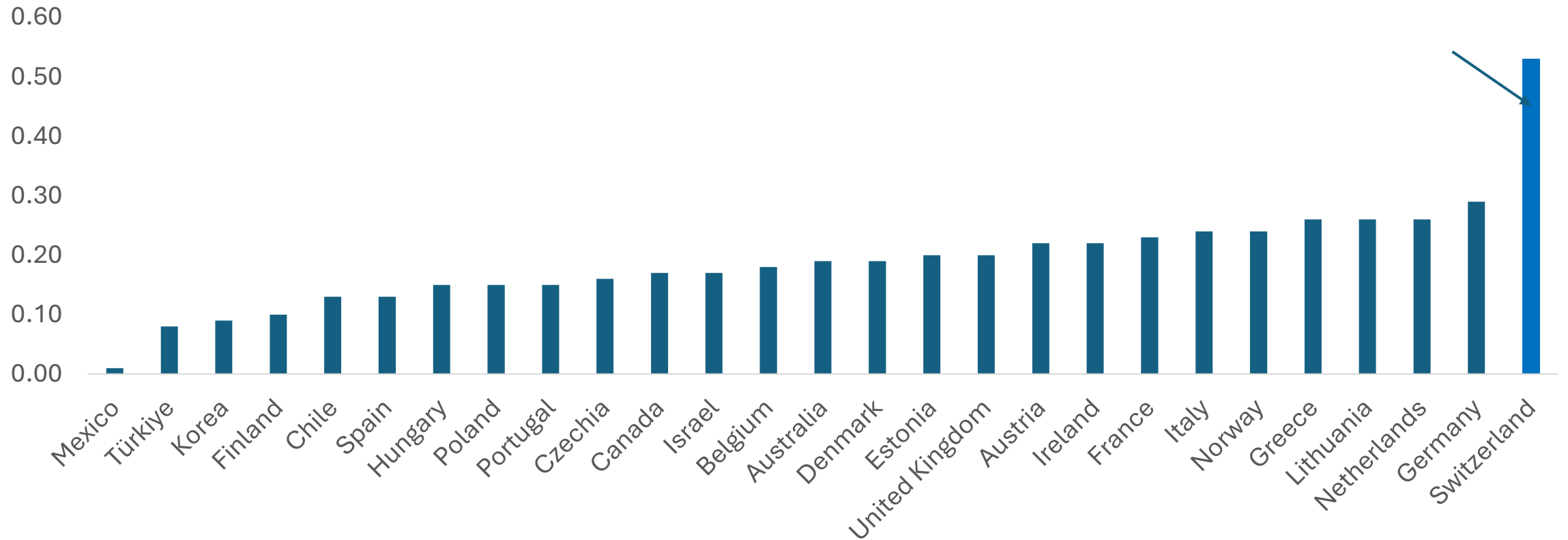


Source: Rose G. Sick Individuals and sick populations. *Int J Epidemiol.* 1985; 12:32-38.

- Widespread, **society-wide interventions** prevent more cases than strategies that target high-risk individuals
- Emphasise **distribution of risk**: shift entire population risk profile (not just extremes)

# Very high rates of psychiatrists in Switzerland, 2023

Psychiatrists per 1,000 inhabitants, 2023, OECD



# What are the causes of population mental health?

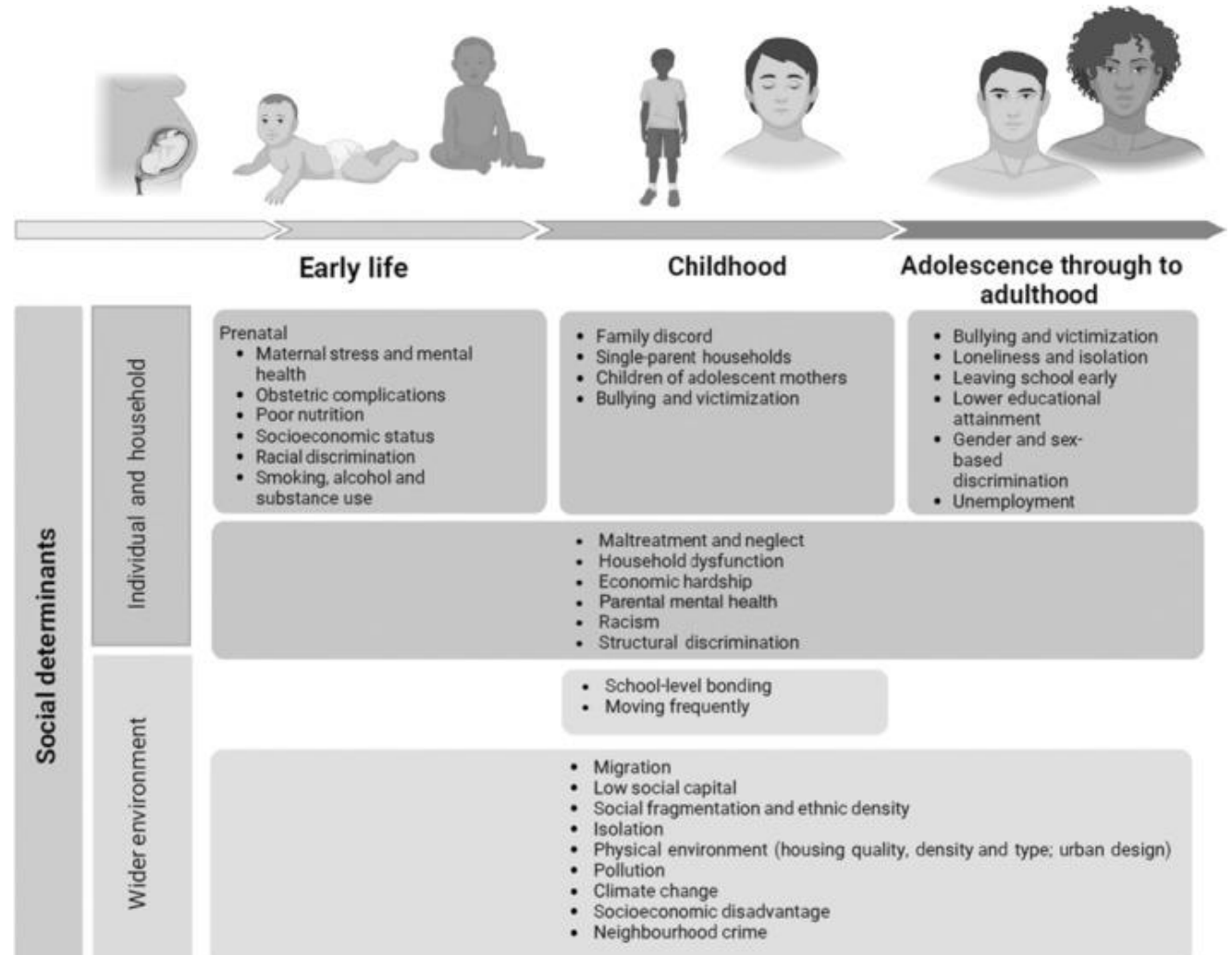


Forum – Social Determinants of Mental Health and Disorder, and Effective Prevention Strategies

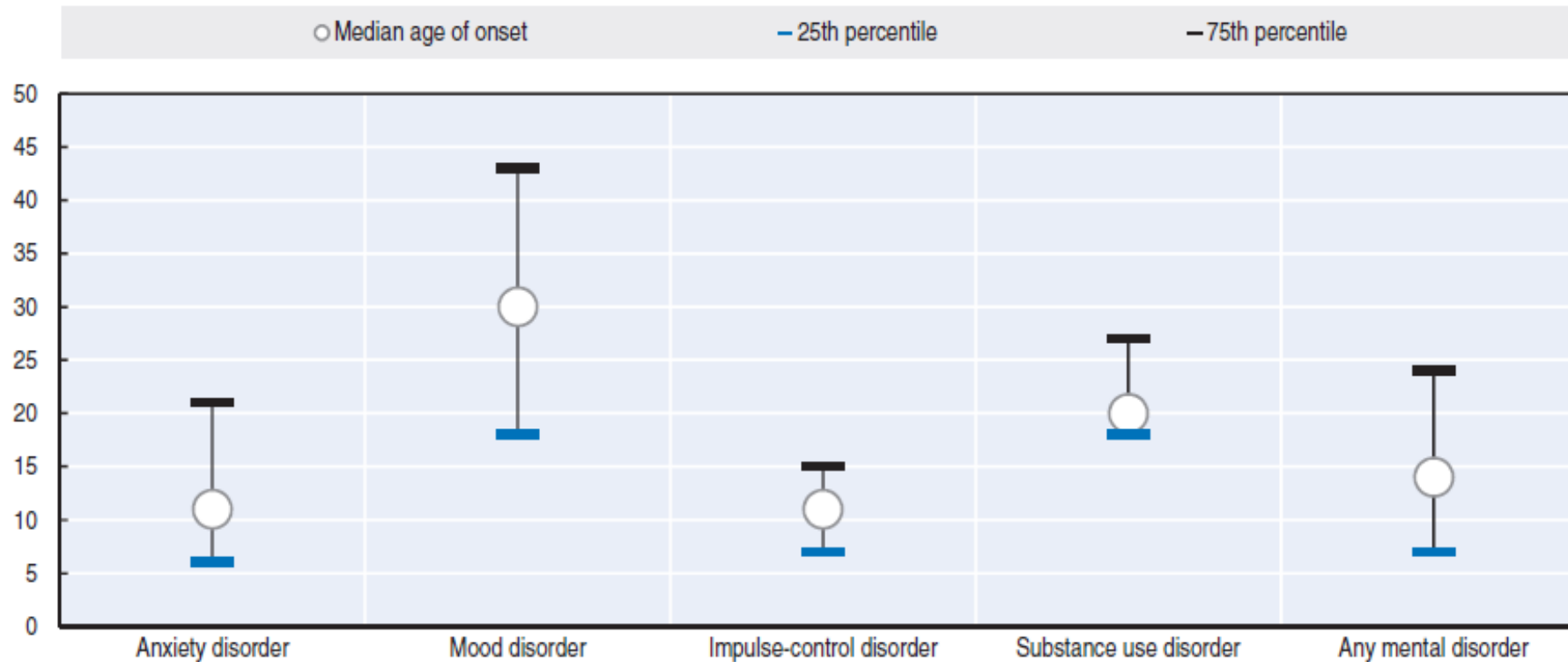
Free Access

## The social determinants of mental health and disorder: evidence, prevention and recommendations

James B. Kirkbride, Deidre M. Anglin, Ian Colman, Jennifer Dykxhoorn, Peter B. Jones, Praveetha Patalay, Alexandra Pitman, Emma Sonesson, Thomas Steare, Talen Wright, Siân Lowri Griffiths



# Most mental disorders first emerge around adolescence or early adulthood



Source: OECD compilation based on Kessler, R. et al. (2005), *Archives of General Psychiatry*, No. 62, pp. 593-603.



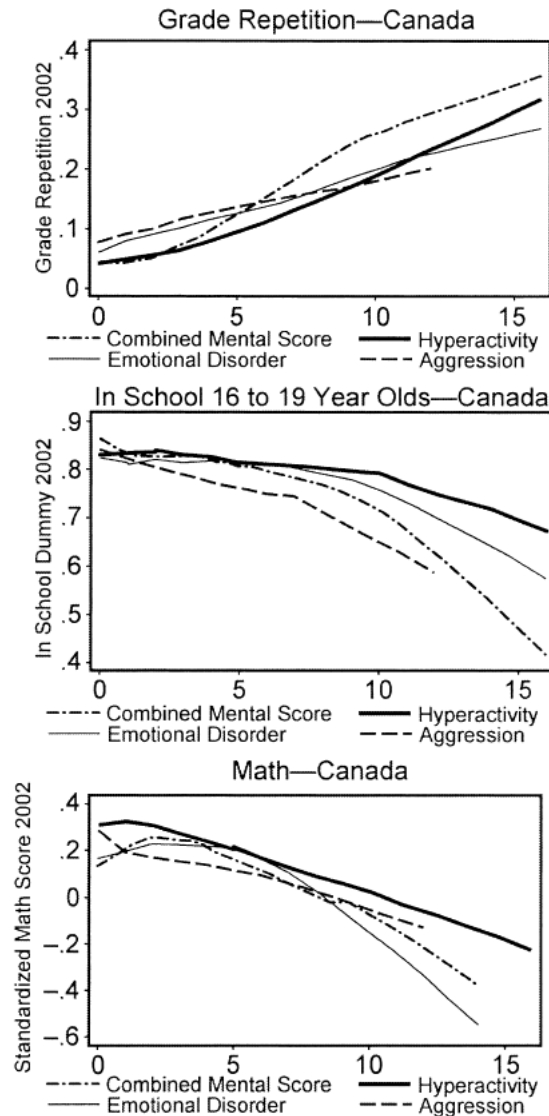
# Why invest in mental health: Human capital

- **Two functions:** Mental health improves quality of life (*consumption good*) and enhances productivity and human capital (*investment good*)
- **Skills:** It shapes cognitive skills, decision making, motivation and educational attainment
- **Employment:** Preventing and treating symptoms enhances lifetime productivity, employability and earnings
- **Policy implication:** Mental health is more than a clinical matter -it has broad social and economic impacts

# Mental health as human capital

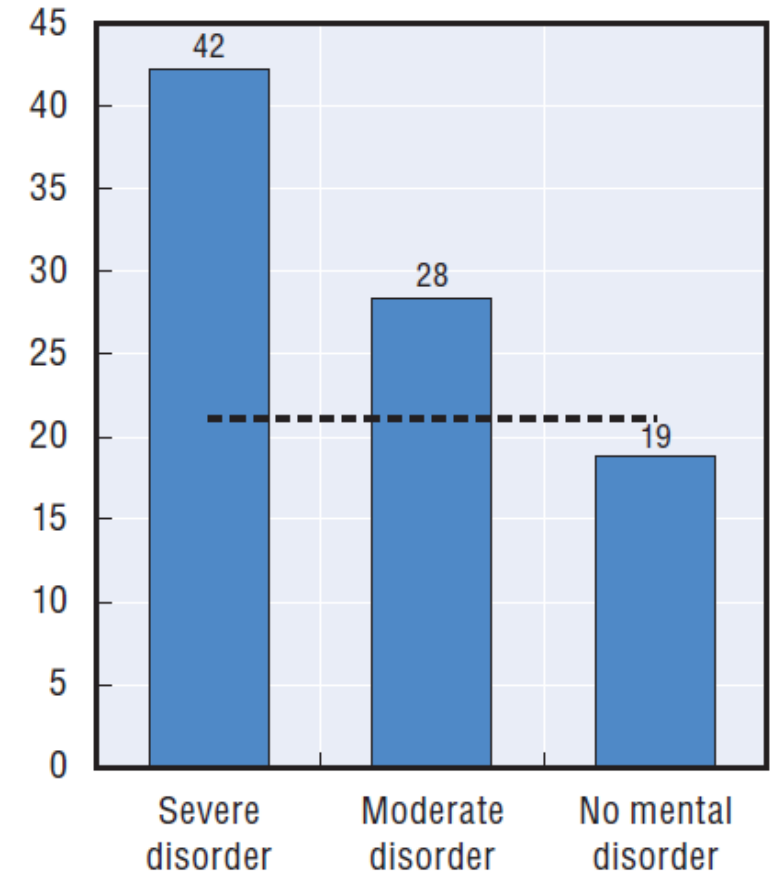
Impact of child mental health scores on educational outcomes (Curry & Stabile, 2007)

Data: Canadian National Longitudinal Survey of Children and Youth (NLSCY)



% absent from work in past 4 weeks, 21 EU countries

Source: OECD (2012), *Sick on the Job? Myths and Realities about Mental Health and Work.*



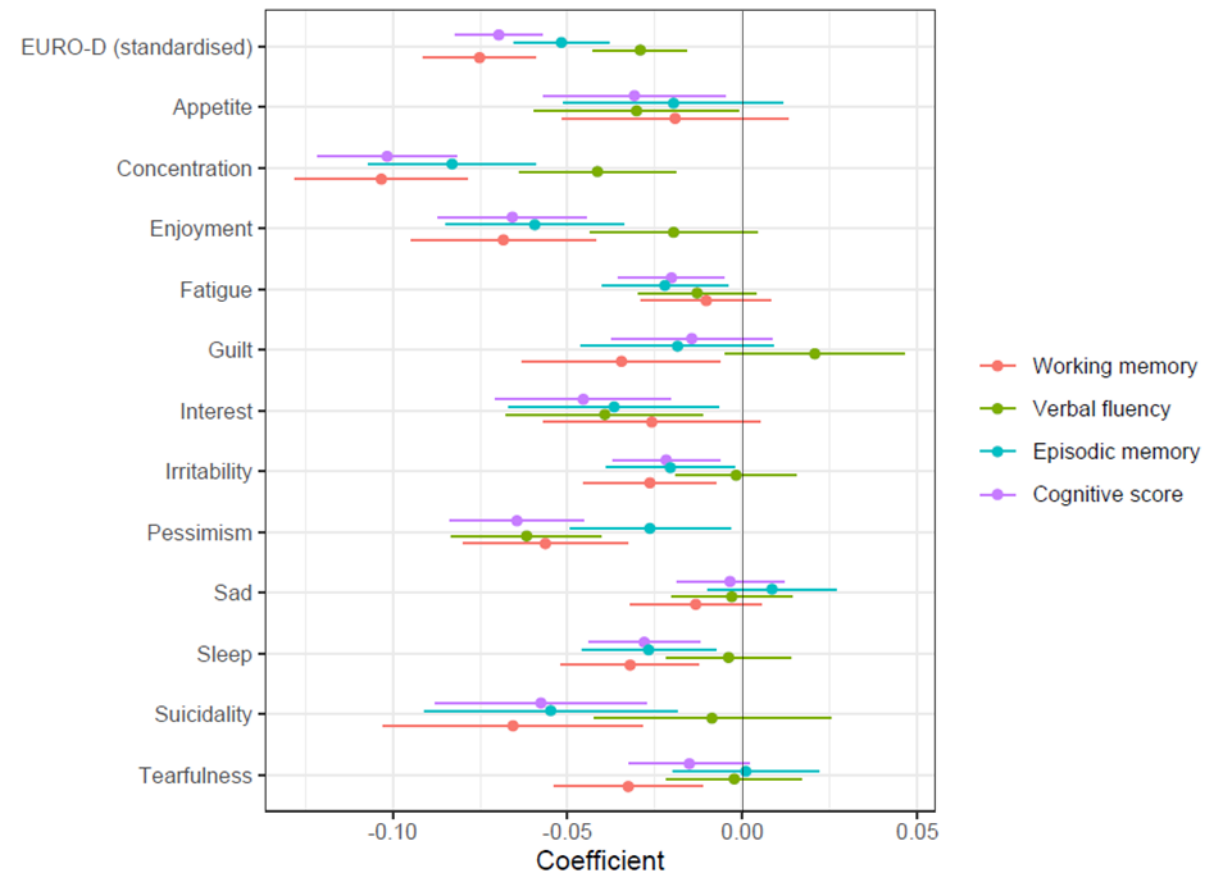
# American Journal of Epidemiology

## The impact of depressive symptoms on cognitive function in early old age: A longitudinal fixed-effect study (in press)

Vahé Nafilyan, Augustin de Coulon,  
Mauricio Avendano



## Depressive symptoms accelerate cognitive decline in older Europeans



Source: SHARE data, aged 50-64, 2010-2018

# The mental health and poverty cycle



Saba, 2021, adapted from Lund et al, The Lancet, 2011

United Nations



General Assembly

Distr.: General  
16 July 2024

Original: English

A/79/162

Report of the Special Rapporteur on extreme poverty and human rights, Olivier De Schutter

The burnout economy: poverty and mental health

RESEARCH

REVIEW SUMMARY

Science

ECONOMICS

Poverty, depression, and anxiety: Causal evidence and mechanisms

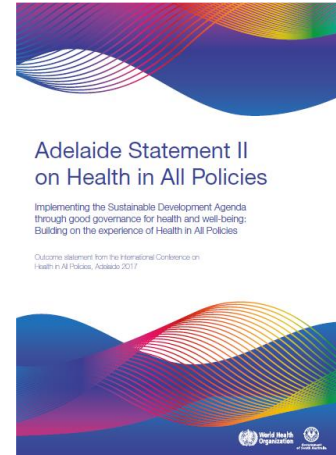
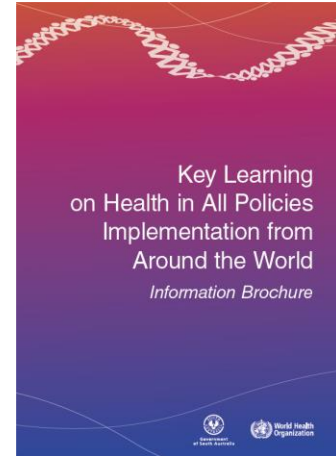
Matthew Ridley, Gautam Rao, Frank Schilbach\*, Vikram Patel

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# How can policies impact mental health?

- Policies across all sectors of government can influence population mental health, i.e., early childhood, education, employment, long-term care, environment
- The same standards used in health care should apply to other policies
- We need to demonstrate which non-health policies improve mental health – and which do not





# American Journal of Epidemiology

JOURNAL ARTICLE ACCEPTED MANUSCRIPT

## Producing change to understand the social determinants of health: the promise of experiments for social epidemiology

Lisa F Berkman ✉, Mauricio Avendano, Emilie Courtin

*American Journal of Epidemiology*, kwac142,

<https://doi.org/10.1093/aje/kwac142>

**Published:** 09 August 2022 **Article history** ▼

### Natural experiments

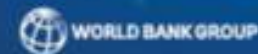
Event or policy that unintentionally divides individuals into treatment and control groups.



## Impact Evaluation in Practice

SECOND EDITION

Paul J. Gertler, Sebastian Martinez,  
Patrick Premand, Laura B. Rawlings,  
and Christel M. J. Vermeersch



# Four case studies

1. **Early life education** : The long-run impact of compulsory schooling laws
2. **Employment**: The impact of state pension age reforms on women's mental health
3. **Long-term care**: the impact of policies that support 'ageing in place' on mental health in older age
4. **Digital health in higher education**: impact of digital technologies on vulnerable student's mental well-being and educational outcomes



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Contents lists available at ScienceDirect

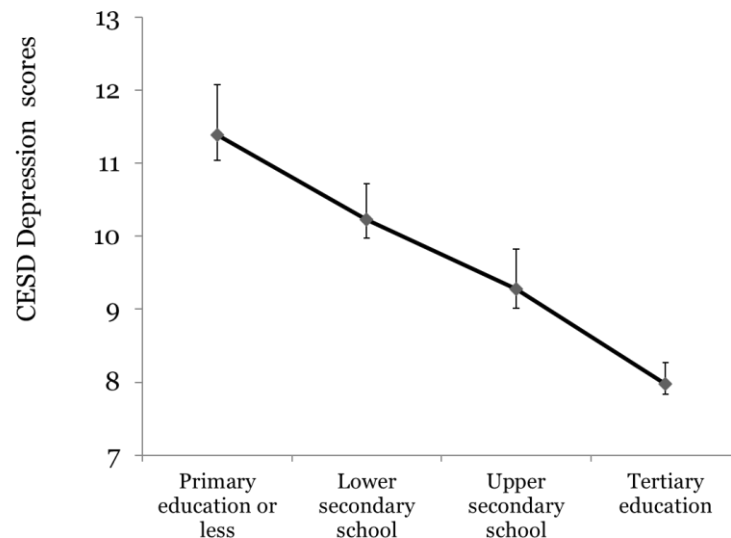
Journal of Public Economics

journal homepage: [www.elsevier.com/locate/jpube](http://www.elsevier.com/locate/jpube)



## Does longer compulsory schooling affect mental health? Evidence from a British reform☆

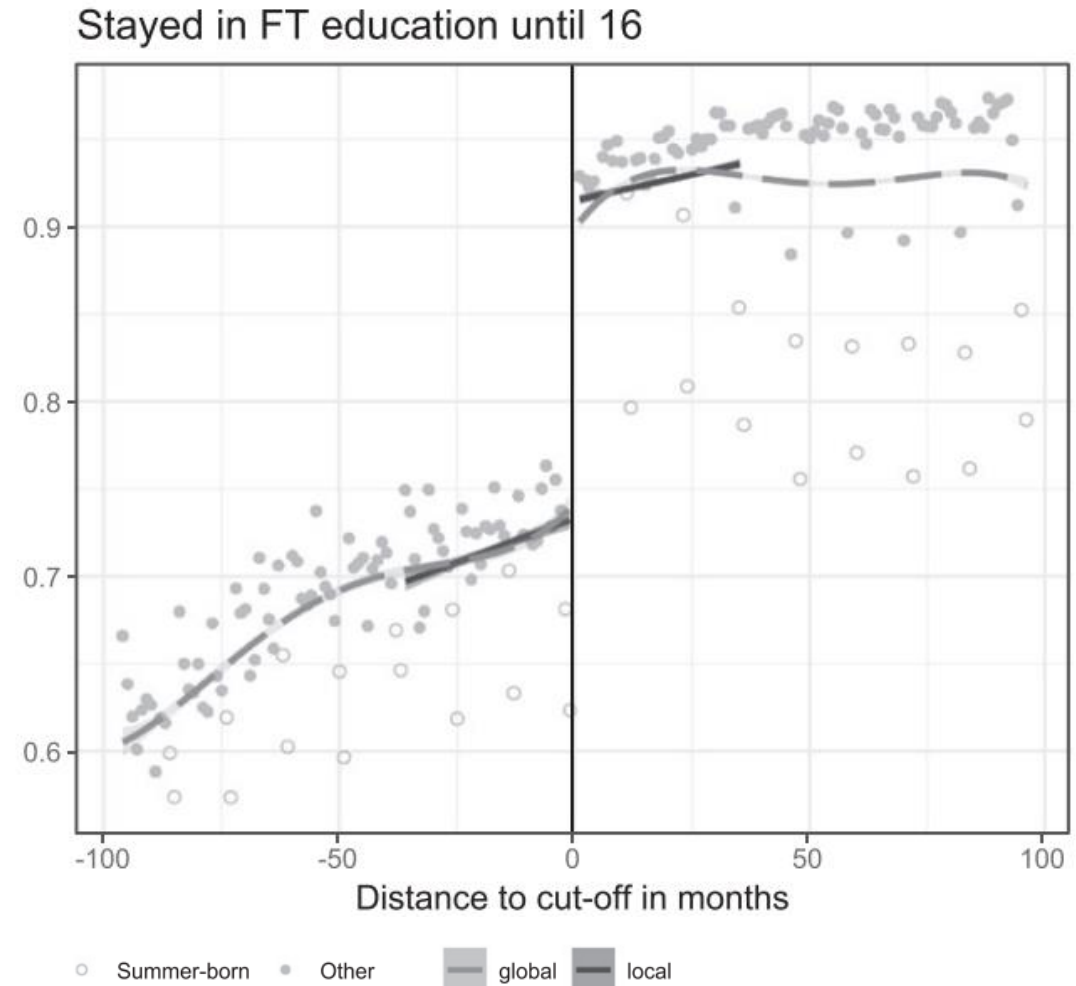
Mauricio Avendano<sup>a,b</sup>, Augustin de Coulon<sup>c,d,e</sup>, Vahé Nafilyan<sup>c,d,f,\*</sup>



- School leaving age was raised 1972 in England and Wales
- Children born before 1<sup>st</sup> September 1957 could leave school when they turned **15**, those born after when they turned **16**
- Affected about **25% of the cohort**

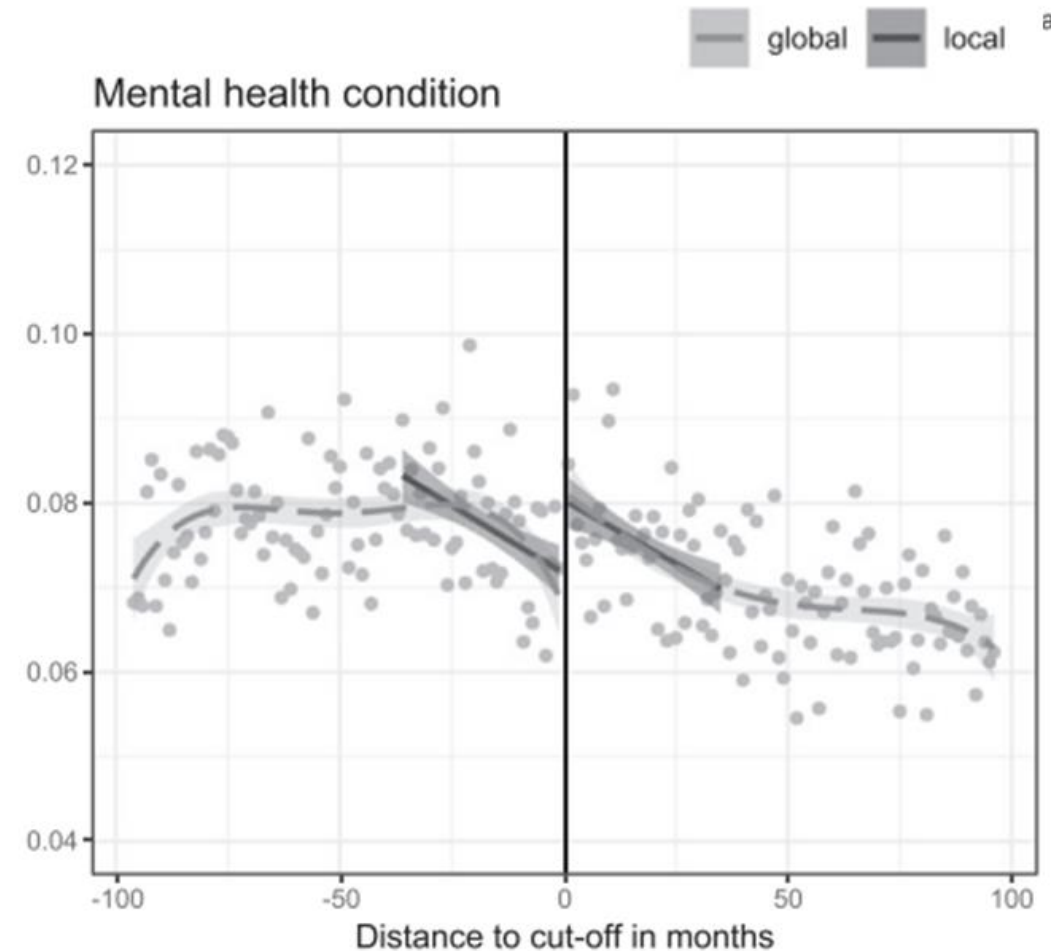
# Fuzzy Regression Discontinuity Design (FRD): Law increased probability of leaving school at age 16

- Compulsory schooling laws generate discontinuity in years of schooling at the threshold
- Law increase probability of staying at school until age 16



# Impact of compulsory schooling law on mental health condition in adulthood

- Compulsory schooling law increased probability of reporting mental health condition age in adulthood
- A year of extra schooling increases probability of a mental health condition by 3.9 percentage points



# Long-term effects of compulsory schooling on physical, mental and cognitive ageing: a natural experiment

Emilie Courtin,<sup>1</sup> Vahe Nafilyan,<sup>2</sup> Maria Glymour,<sup>3</sup> Marcel Goldberg,<sup>4,5</sup> Claudine Berr,<sup>6</sup> Lisa F Berkman,<sup>1</sup> Marie Zins,<sup>4,5</sup> Mauricio Avendano<sup>7,8</sup>

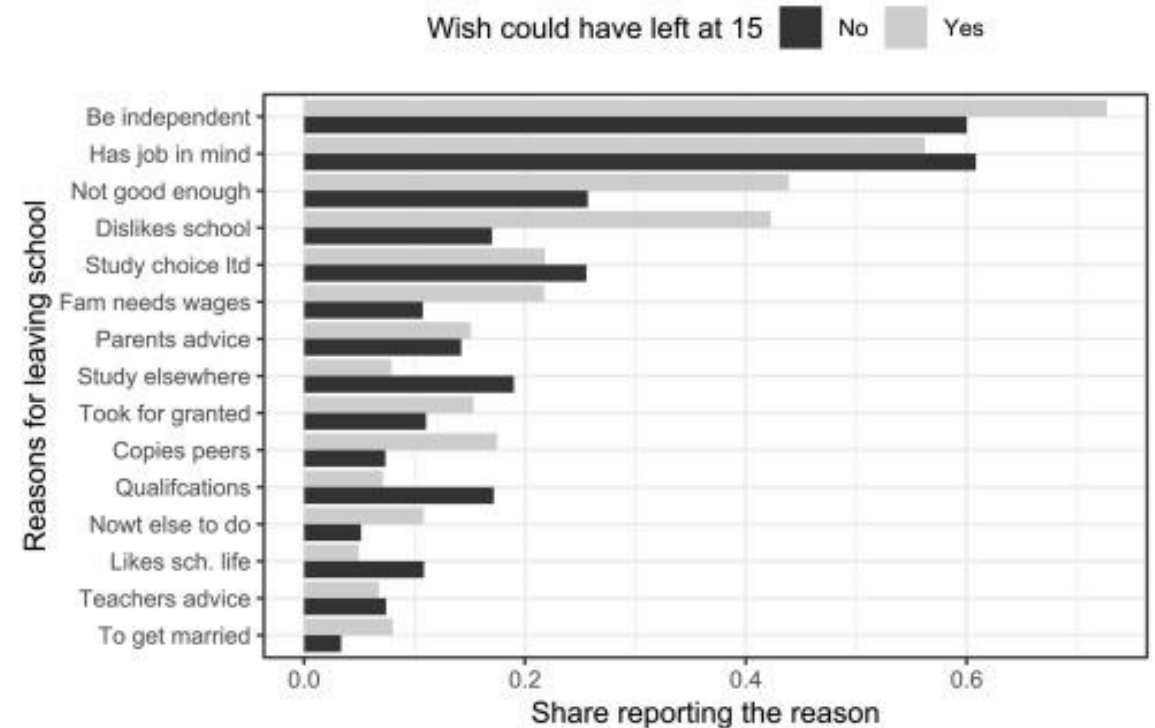
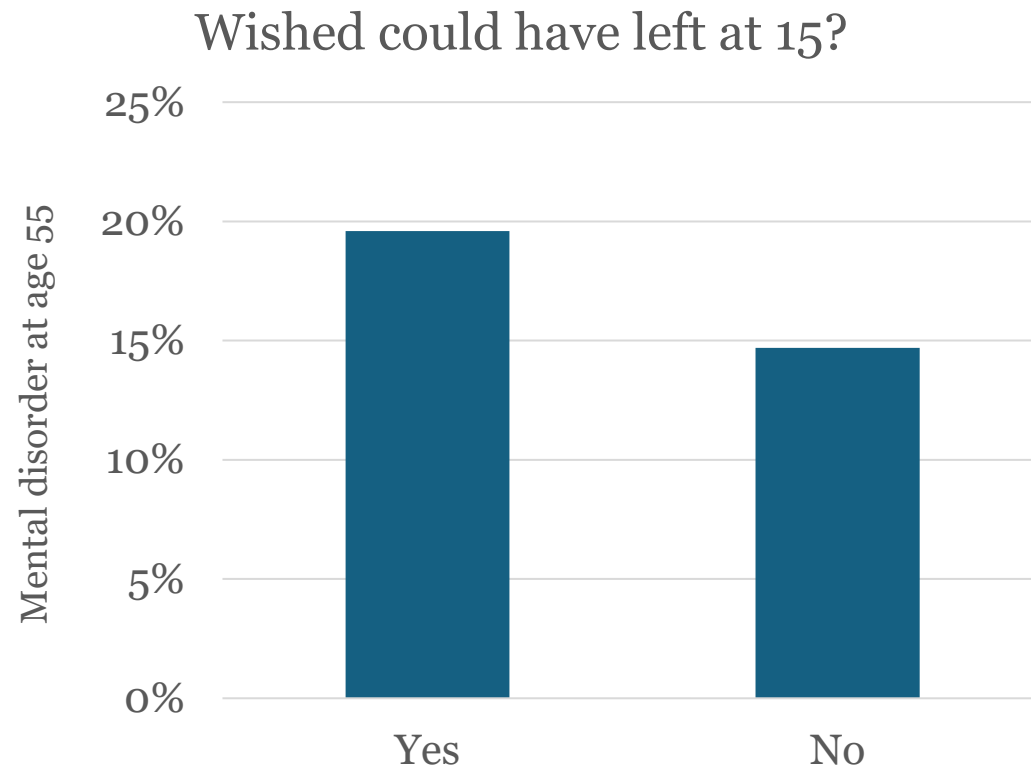


Jean Berthoin

- The Berthoin reform raised the minimum school leaving age from 14 to 16 years in 1959
- All individuals born after the 1st of January 1953 had to stay two years longer in school

	Men				Women			
	$\beta$	95% CI	OR	95% CI	$\beta$	95% CI	OR	95% CI
Cognitive score	0.15	0.06 to 0.24	1.81	1.26 to 2.66	-0.01	-0.13 to 0.12	0.84	0.60 to 1.13
CES-D score	0.22	-0.73 to 1.17	1.05	0.83 to 1.32	1.52	0.33 to 2.71	1.27	1.05 to 1.54
Hand grip strength	0.07	-0.88 to 1.02	1.02	0.82 to 1.27	-0.73	-1.51 to 0.05	0.07	0.01 to 1.04
Finger tapping	-0.55	-1.95 to 0.85	0.89	0.65 to 1.21	0.05	-1.37 to 1.47	1.30	0.86 to 1.99
Walking speed	-0.01	-0.05 to 0.02	0.74	0.53 to 1.02	0.02	-0.02 to 0.06	1.04	0.76 to 1.43

# Impact of compulsory schooling law on mental health condition in adulthood



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## Later retirement, job strain, and health: Evidence from the new State Pension age in the United Kingdom

Ludovico Carrino [✉](#) Karen Glaser, Mauricio Avendano

*Health Economics*. 2020;29:891–912.

- Pension Act 1995 (also 2011 and 2014)
- Affected women born on or after April 1950
- State Pension Age (SPA) increases since May 2010



**How does the increase in the state pension age influence the mental health of older women?**



# Did women's mental health change because of the UK state pension reform?

**Meryl Streep**



**Born in 1949**

When turning **60 (in July 2009)** she is ABOVE SPA and can claim a pension

**Isabelle Huppert**



**Born in 1953**

When turning 60 (2013) she is BELOW SPA and cannot claim a pension until turning **63 (2016)**

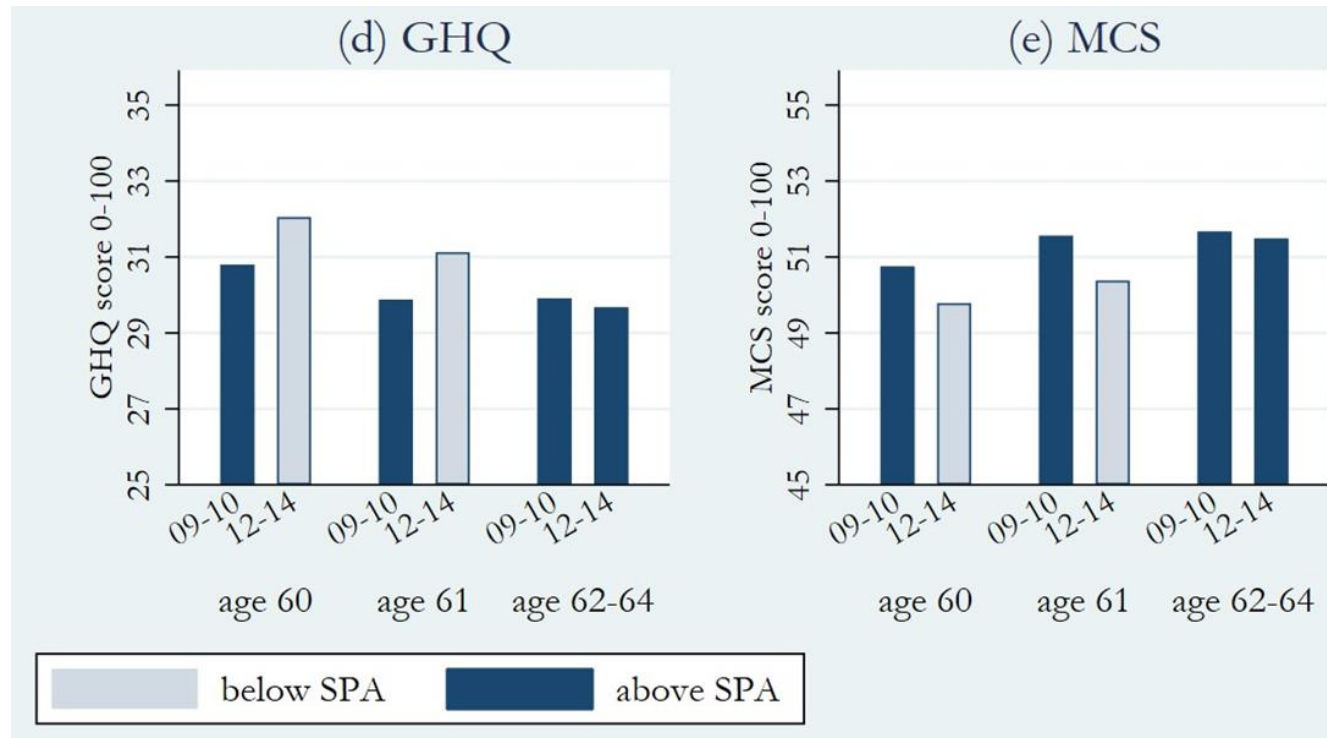
**Theresa May**



**Born in 1956**

When turning **60 (in oct 2016)** she is BELOW SPA and cannot claim a pension until turning **66 (2022)**

# Women affected by the pension reform had worse mental health than women who could retire at age 60



**Working past 60 due to reform  
→ +6.2 pts in serious depressive  
symptoms**

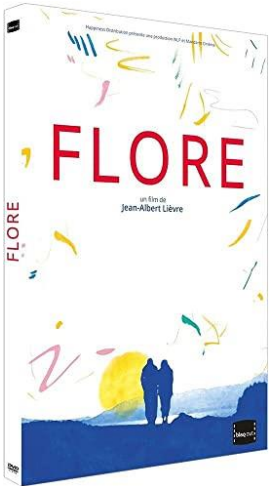
	(1) In paid work	(2) GHQ	(3) GHQ cutoff
Being below-SPA	0.101*** (0.035)	1.993** (1.032)	0.062** (0.032)

# Four case studies

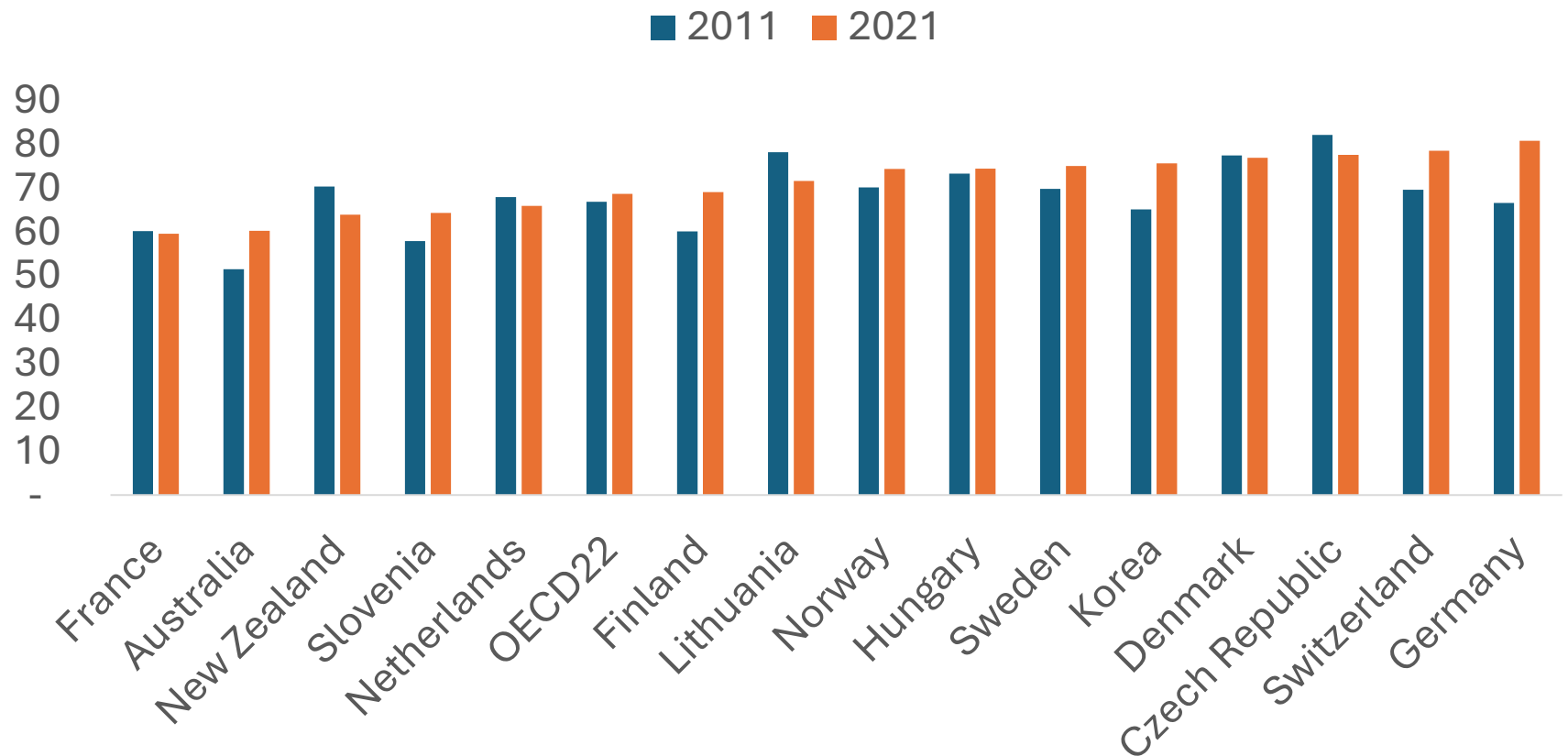
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# Can home-based care policies improve mental health in later life?

## Ageing in place



## Share of long-term care provided at home



OECD, 2022

## There Is No Place Like Home: The Impact of Public Home-Based Care on the Mental Health and Well-Being of Older People

Ludovico Carrino , Erica Reinhard, Mauricio Avendano

*Health Economics*, 2025; 34:1085–1102  
<https://doi.org/10.1002/hec.4948>

Legislation on  
eligibility rules

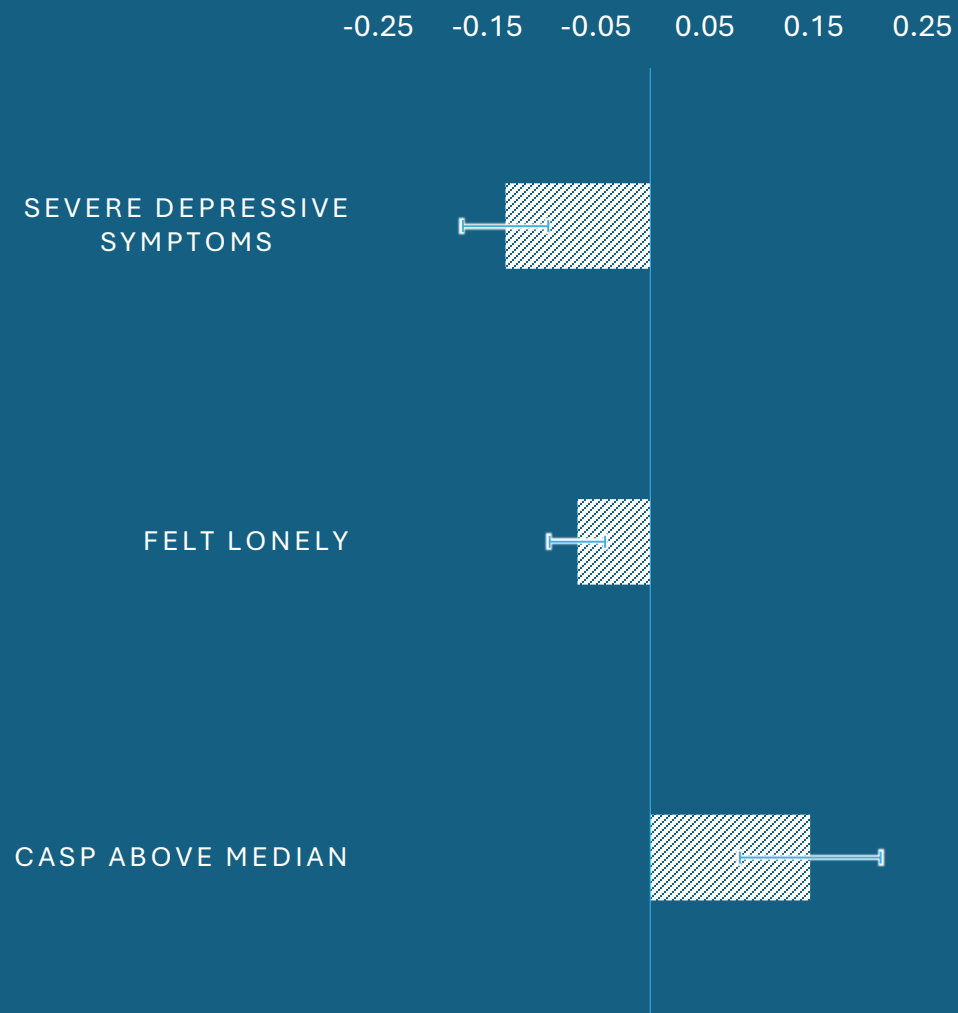
Index reflecting  
probability of being  
eligible for home-based  
care



Survey of Health,  
Ageing & Retirement in  
Europe (SHARE)

- 7 waves (2004-2016)
- Ages 65 and older
- Belgium, Germany, France and Spain
- 24,857 observations

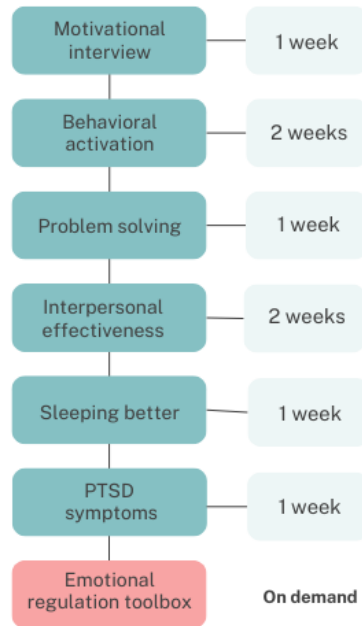
## IMPACT OF HOME-BASED CARE ON MENTAL WELL- BEING



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# Can self-help digital technologies improve mental health and education? A randomised experiment



Duration:  
8 - 10 weeks

Vulnerable university students in Colombia (360,000)



Digital Platform

Mental Health

Human capital

Control group

Mental health

Human capital



**Solution-oriented  
Research for Development  
Programme**

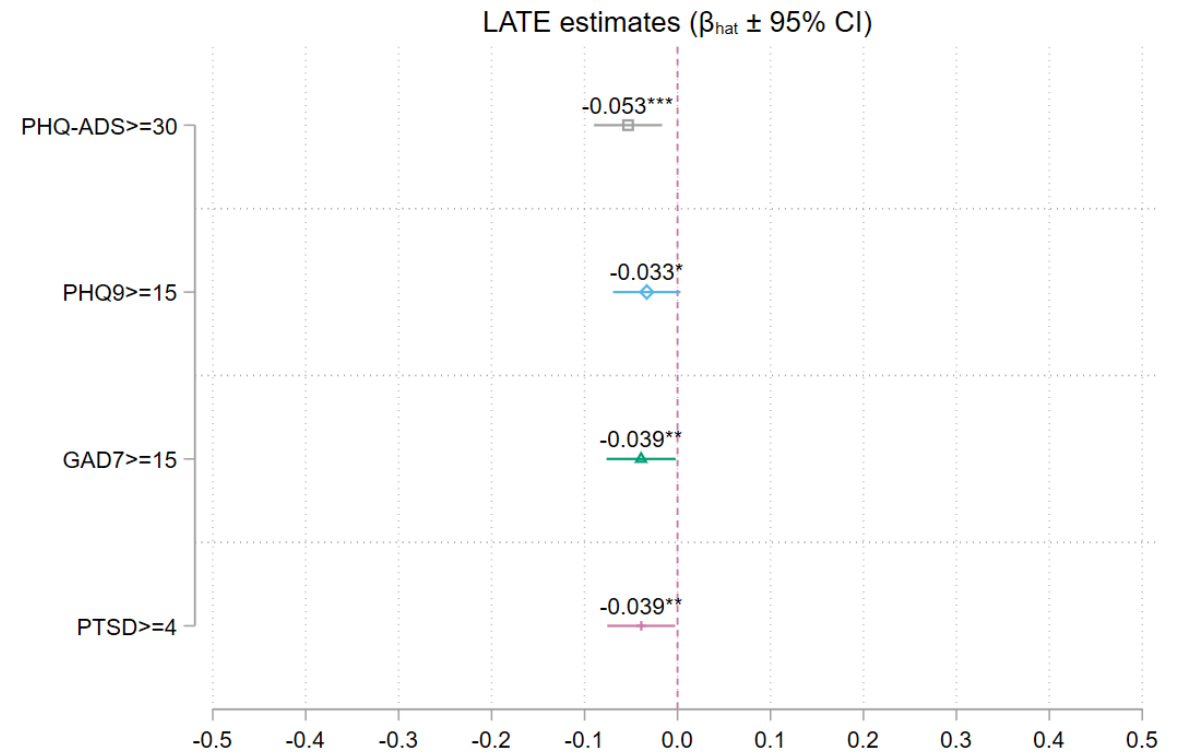
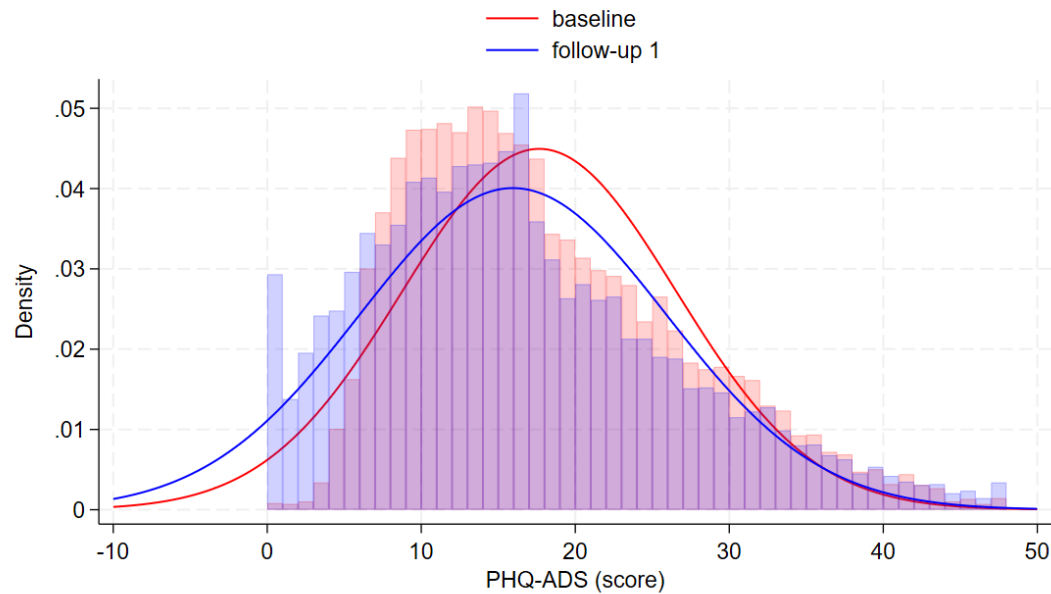


Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun svizra  
  
Swiss Agency for Development  
and Cooperation SDC



**Swiss National  
Science Foundation**

# Impact of assignment to Youth Well-being digital platform on depression-anxiety score at 3 months, Colombia (n=9,719)



Digital platform shifts distribution of depression and anxiety symptoms to the left, and reduces severe cases by 5.3 percentage points



# What lessons do these case studies offer for a public health approach in Switzerland?

- Policies that shape social risk factors can profoundly influence population mental health
- Policy effects are often long-lasting –reforms should consider mental health consequences
- Population-level interventions can shift the distribution of symptoms and help prevent mental disorders
- Mental health investments can strengthen human capital (education, employment, cognitive function)

# Conclusion and implications

- **Mental well-being matters at every life-transition:** childhood → adolescence, school → work, retirement → ageing
- **Policies** affecting these transitions profoundly shape life-time mental health risk
- **More than Medicine:** mental health underpins human capital - education, employment, and cognitive function
- **Health systems often focus on severe illness:** public health must shift population risk and prevent mental illness
- **Every area of public policy offers an opportunity** to shift risk, prevent and improve the mental health of populations